

South Dakota Board of Nursing

South Dakota Department of Health 4305 S. Louise Avenue Suite 201; Sioux Falls, SD 57106-3115 (605) 362-2760; Fax: 362-2768; www.state.sd.us/doh/nursing

Nurse Aide **Application for** *Re-Approval* **of Training <u>Program</u>**

All Nurse Aide (NA) Training Programs in South Dakota must be approved by the South Dakota Board of Nursing pursuant to <u>ARSD 44:04:18:15</u>. Approval status is granted for a two-year period. Written approval or denial of approval will be issued within 90 days after receipt of the application. Send completed application and supporting documentation to:

South Dakota Board of Nursing 4305 S. Louise Ave., Suite 201 Sioux Falls, South Dakota 57106-3115

Nan Add	ress: 412 5, madison New Underwood, SD 57761
Pho E-m	ne Number: 605 754-6489 Fax Number: 605 754-6488 ail Address of Faculty: Llorentz@good-Sam. Com
Sel	Request re-approval without changes to program coordinator, primary instructor, supplemental personnel or curriculum 1. List personnel and licensure information 2. Complete evaluation of the curriculum Request re-approval with faculty changes and/or curriculum changes 1. List personnel and licensure information, attach curriculum vitas, resumes, or work history for new personnel 2. Complete evaluation of the curriculum 3. Submit documentation to support requested curriculum changes

1. List Personnel and Licensure Information:

Program Coordinator must be a registered nurse with 2 years nursing experience, at least one of which is in the provision of long-term care services. The Director of Nursing (DON) may serve simultaneously as the program coordinator but may not perform training while serving as DON, (ARSD 44:04:18:10)

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Name of Program Coordinato	State	Number Exp	olration Verification
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Lorraine Lorentz KU	RSN SD	RO2766/2 9-3	21-7013 *** SULPEROW

If requesting new Program Coordinator, attach curriculum vita, resume, or work history

Primary Instructor must be a licensed nurse (RN or LPN) with 2 years nursing experience, at least one of which is in the provision of long-term care services. The primary instructor is the actual teacher of course material. (ARSD 44:04:18:11)

			A CAMPAGNA	attraction is provided and the second
		THE REPORT OF TH	OR LPN LICENSE	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Name of Primary Instructor		Number	Expiration Verificat	lon Service
		rum per la la cala		
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Lorraine Lorentz EN RSN	151	2027666	9-21-2013	Ca 116 111
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If requesting new Primary Instructor, attach curriculum vita, resume, or work history, and attach documentation supporting previous experience in teaching adults within the past five years or documentation of completing a course in the instruction of adults.

Supplemental Personnel may assist with instruction, they must have one year of experience in their respective field of practice, i.e. additional licensed nurses, social worker, physical therapist. (ARSD 44:04:18:12) *If requesting new Supplemental Personnel*, attach curriculum vita, resume, or work history.



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	LICENSURE/REGISTRATION
Supplemental Personnel & Credentials	Date (Completed by SDBON)
officials, and the American Materials of the American Materials (American Materials and American Materials and Ame	
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Complete Evaluation of the Curriculum: Indicate compliance relative to each standard during the previous 2. two years. Explain any "no" responses on a separate sheet of paper. (Pursuant to ARSD 44:04:18 07, the Department of Health may conduct an unannounced on-site visit to determine compliance with requirements.)

	Standard	Yes	No
, encired	Program was no less than 75 hours.		
Nursing and orients	Provided minimum 16 hours of instruction prior to students having direct patient		
Procare videos	contact. • Provided minimum 16 hours of supervised practical instruction; instructor ratio did not exceed 8		
CIAS	students for one instructor. • Provided instruction on each content area (see ARSD 44:04:18:15):	1	
	Basic nursing skills	ر	
MODE LINES	Personal care skills	1/	
10000 to lee	Mental health and social services		
Marse .	Care of cognitively impaired clients		
bysy.	Basic restorative nursing services	اس	
'	Residents' rights	1	
Skills >	 Students did not perform any patient services until after the primary instructor found the student to be competent 	/	
checkoft	Students only provided patient services under the supervision of a licensed nurse		
	 Your agency maintains a 75% pass rate of students on the competency evaluation 		
	(written and skills exam taken through the SD Healthcare Association).		1 25/20
(WC TO	ne not utilized the we care on line course yet, but are articipating switching to that 3. Submit Documentation to Support Requested Curriculum Changes: Name of Course (if applicable): Pro Care Videos, How to be a Nurse Assistant, We Care	. online	Cour
	A variety of teaching methods may be utilized in achieving the classroom instruction such as independent instruction, and online instruction. Submit reference list of teaching materials utilized (include name of book or resource, publisher, publisher)		
	Submit documentation that supports requirements listed in ARSD 44:04:18:15, including:		
	☐ Behaviorally stated objectives with measurable performance criteria for each unit of curriculum		
	Curriculum, objectives and agenda documenting the requirements for the minimum 75 hour course a	as follows:	
	A minimum of 16 hours of instruction prior to student having direct patient contact; the 16 hours	irs must in	ciude:
	Communication and interpersonal skills, infection control, safety/emergency procedures, residents' independence, respecting residents' rights.	, promodni	•
	A minimum of 16 hours of supervised practical instruction with enough instructors to ensure sa	afe and effe	ective
	care; the instructor ratio may not exceed eight students for one instructor.		
	Instruction in each of the following content areas (see ARSD 44:04:18:15 for more detail):	10 a 1	
	Basic nursing skills (including documentation) including: vital signs; height and weight; needs; recognizing abnormal changes in body functioning and the importance of reportion.	ing such ch	onment langes
	to a supervisor; and caring for dying clients; Personal care skills, including: bathing; grooming, including mouth care; dressing; toile eating and hydration; feeding techniques; skin care; and transfers, positioning, and tur	ting; assist ning;	ing with
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	Mental health and social services, in developmental tasks associated with dignity, and recognizing sources of	ncluding: responding appropriately to behaviors; awareness of h aging process; respecting personal choices and preserving client emotional support;	
Care of cognitively impaired clients, including: communication and techniques for addressing needs and behaviors;			
П	Basic restorative nursing services, including: self-care; use of assistive devices in transferring; ambulation, eating, and dressing; range of motion; turning and positioning in bed and chair; bowel and bladder care and training; and care and use of prosthetic and orthotic devices;		
Program Coor	dinator Signature: XXVIIII	10 100 Pate: 11-14-11	
This section to	be completed by the South Dak	ota Board of Nursing	
Date Application	on Received: 11/19/11	Date Application Denied:	
Date Approved Expiration Date	1: 11/16/11	Reason for Denial:	
Board Represe	7 . 0 / / 0		
	ent to Institution: 11/15/11		